



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE

RECEIVED

By Carol Day at 11:15 am, Sep 03, 2015

REPORT #7

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 107992	PRINTER SN 099.3586.825	DATE OF INSPECTION 09/02/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 211 W. Broadway Webb City, MO		TIME OF INSPECTION 6:31 am

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

☒ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER Guth LOT # 15050 EXP. DATE 03/09/2017

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN MP 2947 SIMULATOR EXP DATE 06/23/2016

☒ CALIBRATION CHECK -- (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 .104

TEST 2 .103

TEST 3 .103

☒ RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	2	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	1
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

INSPECTING OFFICER

SIGNATURE

PRINT NAME

Christopher Shonk

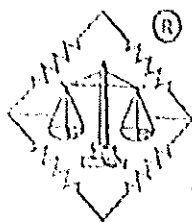
TYPE II PERMIT EXPIRATION DATE

250170 / 07/23/2017

TELEPHONE NUMBER

(417) 673-1911

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 15050 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 11, 2015, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1218% (w/vol) ethyl alcohol. The expiration date for this lot number is March 9, 2017 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted, L. Pauley, President
GUTH LABORATORIES, INC.

AS IV Serial no: 107992
Version no: 532B

TEST RECORD 00265

Temp Date Time 210L

Air Blank:
09/02/15 06:31 .000
Calibration Check:
22 09/02/15 06:31 .104

Subject Name

TEST #1

Subject I.D.

Operator Name, I.D.

Christopher Shank 457

Location

WCPD

AS IV Serial no: 107992
Version no: 532B

TEST RECORD 00267

Temp Date Time 210L

Air Blank:
09/02/15 06:34 .000
Calibration Check:
23 09/02/15 06:34 .103

Subject Name

TEST #3

Subject I.D.

Operator Name, I.D.

Christopher Shank 457

Location

WCPD

AS IV Serial no: 107992
Version no: 532B

TEST RECORD 00269

Temp Date Time 210L

Air Blank:
09/02/15 06:37 .000
Subject Test: Auto
23 09/02/15 06:37 .000

Subject Name

SOBER SAMPLE

Subject I.D.

AS IV Serial no: 107992
Version no: 532B

TEST RECORD 00266

Temp Date Time 210L

Air Blank:
09/02/15 06:33 .000
Calibration Check:
23 09/02/15 06:33 .103

Subject Name

TEST #2

Subject I.D.

Operator Name, I.D.

Christopher Shank 457

Location

WCPD

AS IV Serial no: 107992
Version no: 532B

TEST RECORD 00268

Temp Date Time 210L

VOID: RFI
12 09/02/15 06:35

Subject Name

RFI CHECK

Subject I.D.

Operator Name, I.D.

Christopher Shank 457

Location

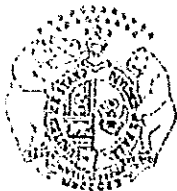
WCPD

Operator Name, I.D.

Christopher Shank 457

Location

WCPD



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT
TYPE II

CHRISTOPHER SHONK

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

INTOX DMT, INTOXILYZER 8000, ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 7/23/2015

NUMBER 250170

EXPIRES 7/23/2017

CI 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAD-4 (03-10)